PTO/SB/05 (08-03)
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12604	U.S. PTC

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No. CUNO-330.2 First Inventor BLAZE, Martin et al.

TRANSMITTAL	Title		CENTER POST SYSTEM FOR TRANSPORTING				
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express	Mail Label		EV 03	2124465 US		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	n contents.		ADDRESS TO:	Commis P. O. Bo	o Patent Application sioner for Patents x 1450 ria VA 22313-1450	22390	
 Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee proce Applicant claims small entity status. See 37 CFR 1.27. 	ssing)		Computer Pro	ogram <i>(Ap_l</i> nino Acid (plicate, large table or pendix) Sequence Submission		
Specification [Total Pages [preferred arrangement set forth below] - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description	27] D		Specification i. CI ii. Pa Statem	Sequence D-ROM or per ents verify	ble Form (CRF) Listing on: CD-R (2 copies); or ing identity of above copies PLICATION PARTS er sheet & document(s))		
- Claim(s) - Abstract of the Disclosure 4.	completed) (S) eting inventor(see 37 CFR	10.	37 CFR 3.73(b) (when there is all English Transl Information Dis Statement (IDS Preliminary An Return Receip (Should be specified Copy (if foreign priority Nonpublication (b)(2)(B)(i). Agor its equivaler Other:	o) Statemen assignee) ation Docusciosure S)/PTO-14 nendment t Postcard iffically itemiof Priority is claimed) a Request oplicant mut.	Power of Attournent (if applicable) Copies of IDS Citations (MPEP 503) Zed) Document(s) under 35 U.S.C. 122 ust attach form PTO/SB/3	,	
specification following the title, or in an Application Data Shee Continuation Divisional Continuation: Examiner OCAM For CONTINUATION OR DIVISIONAL APPS only: The enunder Box 5b, is considered a part of the disclosure of treference. The incorporation can only be relied upon when	t under 37 CFi uation-in-par PO, M. tire disclosur he accompan en a portion h	R 1.76: t (CIP) of proceedings of the prior a ving continuation.	ior application Group / application, from ion or divisiona or divisiona	No.: Art Unit:1 n which ar I applicatio	09/941,893 723 o oath or declaration is su	- pplied ted by	
Customer Number:			or	Corr	espondence address below		
R. Thomas Payne		<u> </u>					
Name CUNO Incorporated			-		<u>-</u>		
Address 400 Research Parkway]	
P.O. Box 1018							
City Meriden	State	СТ	Z	ip Code	06450-1018		
Country US	elephone	(203) 238-873		Fax	(203) 238-8716		
Name (Print/Type) R/Thomas Payne		Regis	tration No. (Atto	mey/Agent) Date	30,674		
Signature Mymon 4				Date	January 26, 2004	/	

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL	Complete if Known					
	Application Number	NEW				
for FY 2004	Filing Date	HEREWITH				
Effective 10/01/2003. Patent fees are subject to annual revision.	First Named Inventor	BLAZE, Martin et al.				
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name					
	Art Unit					
TOTAL AMOUNT OF PAYMENT (\$) \$1,320.00	Attorney Docket No.	CUNO-330.2				

METHOD OF PAYMENT (check all that apply)					E CALCULA	TION (co	intinued)	
Check Credit card Mone Other None	3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account:	Fee	Fee	Fee	Fee	=	Descriptio	on	Fee Paid
Deposit Account 033879	Code 1051	(\$) 130	2051	(\$) 65	Surcharge - late	filing fee o	r oath	
Number Deposit	1052	50	2052	25	Surcharge - late sheet	provisiona	l filing fee or cover	
Account Name CUNO Incorporated	1053	130	1053	130	Non - English sp	pecification		
The Director is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a requ	est for ex p	arte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting pub Examiner action		SIR prior to	
Charge any additonal fee(s) or any underpayment of fee(s)	1805	1,840*	1805	1,840*	Requesting pub action	lication of S	SIR after Examiner	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1251	110	2251	55	Extension for re	ply within fi	rst month	
	1252	420	2252	210	Extension for re	ply within s	econd month	
FEE CALCULATION	1253	950	2253	475	Extension for re	ply within th	nird month	
1. BASIC FILING FEE Large Entity Small Entity	1254	1,480	2254	740	Extension for re	ply within fo	ourth month	
Fee Fee Fee Fee Description	1255	2,010	2255	1,005	Extension for re	ply within fit	fth month	
Code (\$) Code (\$) Fee Paid 1001 770 2001 385 Utility filing fee 770.00	1401	330	2401	165	Notice of Appea	al		
1001 770 2001 383 Utility lilling fee 776.00	1402	330	2402	165	Filing a brief in	support of a	in appeal	
1002 540 2002 170 Besign limits les	1403	290	2403	145	Request for ora	l hearing		
1004 770 2004 385 Reissue filing	1451	1,510	1451	1,510	Petition to institu	ute a public	use proceeding	
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive	e - unavoida	able	
SUBTOTAL (1) (\$) \$770.00	1453	1,330	2453	665	Petition to revive	e - unintenti	ional	
The state of the s	1501	1,330	2501	665	Utility issue fee	(or reissue))	
2. EXTRA CLAIM FEES FOR UTILITY AND Fee from	1502	480	2502	240	Design issue fe	е		
Extra Claims below Fee Paid	1503	640	2503	320	Plant issue fee			
Total Claims 41 -20** = 21 X 18.00 = 378.00	1460	130	1460	130	Petitions to the	Commissio	ner	
Independent 5 - 3** = 2 X 86.00 = 172.00	1807	50	1807	50	Processing fee	under 37 C	FR § 1.17(q)	
Multiple Dependent 0.00 = 0.00 Large Entity Small Entity	1806	180	1806	180	Submission of In	nformation	Disclosure	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40	Recording each			
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	property (times Filing a submiss	sion after fir		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	(37 CFR § 1.13 For each addition		on to be examined	
1203 290 2203 145 Multiple dependent claim, if not paid					(37 CFR § 1.1)	29(b))		
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801		Request for Cor			
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for exp of a design app		imiation	
and over original patent	Oth	er fee (specify)				
SUBTOTAL (2) (\$) \$550.00								
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) \$0.00						\$0.00	
SUBMITTED BY						Complete (if applicable)	
Name R. Thomas Payne		Registra Attomey	ation No //Agent)	0.	30,674	Telephon	(203) 238	3-8737
Signature					January 26.	, 2004		

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